2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000087778

Entity Name: ON-SITE RESTORATION INC

FILED Apr 30, 2005 Secretary of State

| Entity Name: ON-SITE RESTORATION INC. | | | |
|--|--|----------------------------------|--|
| Current Principal Place of Business: | New Principal Place of Business: | New Principal Place of Business: | |
| 15604 SW 16 CT PEMBROKE PINES, FL 33027 | 851 N.E. 54TH ST. OAKLAND PARK, FL 33334 | | |
| Current Mailing Address: | New Mailing Address: | | |
| 15604 SW 16 CT PEMBROKE PINES, FL 33027 | 851 N.E. 30TH CT. OAKLAND PARK, FL 33334 | | |
| FEI Number: 65-0464712 FEI Number Applied For () | FEI Number Not Applicable () Certificate of Sta | itus Desired () | |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: | | Agent: | |
| HUTT, WILLIAM T 15604 SW 16 CT PEMBROKE PINES, FL 33027 US The above named entity submits this statement for the puin the State of Florida. | urpose of changing its registered office or registere | ed agent, or both, | |
| SIGNATURE: | | | |
| Electronic Signature of Registered Ager | nt Date | | |
| Election Campaign Financing Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | ADDITIONS/CHANGES TO OFFICERS | AND DIRECTORS: | |
| Title: PVSD () Delete Name: HUTT, WILLIAM T Address: 15604 SW 16 CT City-St-Zip: PEMBROKE PINES, FL 33027 | Title: () Change () Addition Name: Address: City-St-Zip: | nc | |
| Title: () Delete Name: Address: City-St-Zip: | Title: PVSD () Change (X) Additi Name: HUTT, WILLIAM Address: 851 N.E. 30TH CT. City-St-Zip: OAKLAND PARK, FL 33334 US | on | |

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM T. HUTT PVSD 04/30/2005